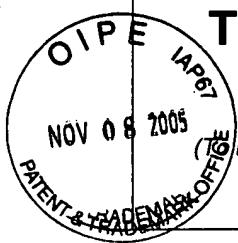


11-09-05

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IPW



TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

Application Number	10/730,759
Filing Date	December 8, 2003
First Named Inventor	Philip H. Mellor
Art Unit	2834
Examiner Name	Heba Elkassabgi
Attorney Docket No.	130209.491

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing	<input type="checkbox"/> Communication to TC
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Receipt	<input type="checkbox"/> Appeal Communication to
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Board of Appeals and
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a	<input type="checkbox"/> Appeal Communication to
<input type="checkbox"/> Express Abandonment	<input type="checkbox"/> Provisional Application	<input type="checkbox"/> TC (Appeal Notice, Brief,
Request	<input type="checkbox"/> Power of Attorney,	<input type="checkbox"/> Reply Brief)
<input type="checkbox"/> Information Disclosure	<input type="checkbox"/> Revocation, Change of	<input type="checkbox"/> Proprietary Information
Statement and Transmittal	<input type="checkbox"/> Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Cited References	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority	<input type="checkbox"/> Statement under 37 CFR	<input type="checkbox"/> Other Enclosure(s) (please
Document(s)	<input type="checkbox"/> 3.73(b)	identify below):
<input type="checkbox"/> Response to Missing Parts	<input type="checkbox"/> Terminal Disclaimer	_____
under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing	<input type="checkbox"/> CD, Number	_____
Parts/Incomplete Application	<input type="checkbox"/> of CD(s) _____	_____
	<input type="checkbox"/> Landscape Table on CD	

Remarks 3 Replacement Sheets of Formal Drawings (Figs. 1A-1B, 5 and 6)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	00500
Signature			
Printed Name	Frank Abramonte		
Date	November 8, 2005	Reg. No.	38,066

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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